

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. <i>09/900423</i>	FILING DATE					
						APPLICANT(S)						
CLAIMS												
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1							61					
2							62					
3							63					
4							54					
5							65					
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34							94					
35							95					
36							96					
37							97					
38							98					
39							99					
40							100					
41							TOTAL IND.					
42							TOTAL DEP.					
43							TOTAL CLAIMS					
44												
45												
46												
47												
48												
49												
50												
TOTAL IND.	47											
TOTAL DEP.	32											
TOTAL CLAIMS	260	125	125	125	125	125						

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT OF COMMERCE
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